

May 28, 2009

Federal Communications Commissioners  
Re: Proceedings 07-271

Dear Commissioners,

Today I received a call from a 73 year old woman who was in emotional, physical and financial distress. Alone, ill, on an \$800/month fixed income and without family or friends nearby, she told me that suicide was the best thing that could happen to her. Without medications, she wished she could "just end it all right now." Thankfully, I was able to refer her to the National Suicide Prevention Lifeline for help. It is because of my knowledge of, trust in and respect for the NSPL that I was able to make this referral.

Prior to the temporary reassignment, I was well aware of the dozens and dozens of calls I received from people trying to get through on 1-800-SUICIDE and experienced drop calls, received busy signals or the line rang indefinitely with no answer. I recall hearing from several frustrated callers telling me they called from one state and the call was answered by someone in a different part of the country who was surprised and could not help them. I informed KBHC of this and many other instances of technical and administrator problems, however these were all met with either no response or blaming of various carriers. Following are two examples of the magnitude of the problems KBHC had trying to run 800-SUICIDE.

1. On December 6, 2004, I received the following email and that day forwarded it to KBHC:

"Part of my job involves periodic checks of the Help Numbers we hand out. For the second time, I have had an unsatisfactory experience with the 800 Suicide number. The first time resulted in an unusually long transfer/wait time - we finally hung up. The second time resulted in being disconnected shortly after transfer. (The recorded message came on - informing us that the call was being transferred, if this is medical emergency dial 911, etc. Then a brief pause, followed by a click, followed by a busy signal.) I know that you are working hard to help people with depression, so I wanted to bring this to your attention."

2. Nearly a year later the problems remained. Below is an email I sent to KBHC on November 23, 2005:

**From:** Dan Reidenberg [mailto:dreidenberg@save.org]  
**Sent:** Wed 11/23/2005 10:48 AM  
**To:** Reese Butler; Reese Butler  
**Subject:** RE: 1-800-SUICIDE

Hi Reese, I tried to call you this morning but could not get through to you. There is something wrong with the 1-800-SUICIDE line and I wanted to make sure you knew about it. You may also want to let the other NCSP groups know if there are any changes with 1-800-SUICIDE or if there's a problem since many of us still have it listed as a crisis number to call.

We received a call earlier this week saying they'd been calling your number for 10 days and never got through to anyone. They kept getting hung up on. They told us they were glad they were not actually imminently suicidal since they never got through to anyone, but finally they gave up. They contacted us to find out some information they were calling your number for and we provided it.

We started calling the number yesterday and would get a message saying we were being transferred and if it was a medical emergency to hang up and call 911, then it would hang up the call. We did this several times and the same thing happened each time.

Today I called and heard the message. I heard a click and thought it hung me up, but someone at Crisis Connection here in MN answered. I started talking to her and it cut us off and it immediately re-directed my call to Samaritans in another state. I talked with the supervisor there who said she was actually trying to reach you this morning too to tell you of some different problems, although she did say she thinks they've been receiving some calls.

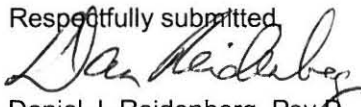
So clearly something is going on and hopefully you can have some tech. people look into it. Thanks, Dan

As the Executive Director of a national nonprofit suicide prevention agency, working with people who are mentally ill and contacting us in crisis, I understand the many challenges our healthcare system faces in assisting those most at risk. I hear them all of the time and know the obstacles people who are suicidal often face. Access to immediate, quality, professional and competent care over the telephone is critical to the safety net needed to keep people alive. That is why I understand that you have a major decision at hand regarding the assignment of these lines. I know first-hand that this is quite literally a life-saving or potentially life-threatening decision that is before you. With nearly 140 crisis centers across the country receiving roughly 50,000 calls a month and another 5,000+ calls from our military personnel through the Vets Line, the stakes couldn't be higher.

The NSPL, in collaboration and partnership with SAMHSA, has developed the finest system we know of to provide immediate, telephonic support services. Their expert staff has developed thorough and comprehensive policies and processes and works hard to ensure certified crisis centers nationwide have the best practices available to date to save lives. This team works 24 hours a day, maintains a strong operational base with sound fiscal management and oversight within numerous legal, ethical and regulatory systems that is quite frankly unmatched. In my opinion, practice and experience, the NSPL ensures that they highest quality, confidential, life-saving, technologically advanced services are met and even exceeded.

While it may be rare to have a governmental body serve in this capacity, when it comes to protecting and saving the lives of our citizens who use the lines the FCC regulates, there is no doubt in my mind that a permanent reassignment is necessary. Without this, I fear that lives will be at stake. Therefore, I urge you to weigh precedence and life knowing that as someone close to the people who make the calls trusts the NSPL to save lives.

Respectfully submitted,



Daniel J. Reidenberg, Psy.D.  
Executive Director - SAVE